

FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

Title of Invention	On-Bit, Analog Multiplexer for Transmission of Multi-Channel Drilling Information																				
Application Number :																					
Date :																					
First Named Applicant:	Mr. Marcel Boucher																				
Attorney Docket Number:	78.1178																				
TOTAL FEE AUTHORIZED \$ 1144																					
Patent fees are subject to annual revisions on or about October 1st of each year.																					
Filing as large entity																					
BASIC FILING FEE																					
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>1001</td><td>770</td><td>770</td></tr><tr><td colspan="4">Subtotal For Basic Filing Fees: \$ 770</td></tr></tbody></table>		Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	1001	770	770	Subtotal For Basic Filing Fees: \$ 770											
Fee Description	Fee Code	Amount \$	Fee Paid \$																		
Utility Filing Fee	1001	770	770																		
Subtotal For Basic Filing Fees: \$ 770																					
EXTRA CLAIM FEES																					
<table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 36</td><td>16</td><td>1202</td><td>18</td><td>288</td></tr><tr><td>Independent Claims : 4</td><td>1</td><td>1201</td><td>86</td><td>86</td></tr><tr><td colspan="5">Subtotal For Extra Claims Fees: \$ 374</td></tr></tbody></table>		Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 36	16	1202	18	288	Independent Claims : 4	1	1201	86	86	Subtotal For Extra Claims Fees: \$ 374				
Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$																	
Total Claims : 36	16	1202	18	288																	
Independent Claims : 4	1	1201	86	86																	
Subtotal For Extra Claims Fees: \$ 374																					
AUTHORIZED BILLING INFORMATION																					
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:																					
Deposit account number:	180584																				
Access Code	****																				
Deposit name:	Reed Tool Co.																				
Deposit authorized name:	Jeffery E. Daly																				
Signature:	Jeffery E. Daly																				
Date (YYYYMMDD):	2004-04-14																				
Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.																					